## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10626148

CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			36				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			36 minus 20=		* 16			X\$ 9=		OR	X\$18=	288
INDEPENDENT CLAIMS			5 minus 3 =		* 2		1	X42=	,	OR	X84=	168
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				Ī	+140=		OR	+280=	
* if	the difference	in column 1 is	less than z	ero, ente	r "0" in c	'0" in column 2		TOTAL		OR	TOTAL	1206
CLAIMS AS AMENDED - PART II									•		OTHER	
(Column 1)			(Colum					SMALL ENTIT		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- CI AIIA			X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		T	+140=		OR	+280=	
							L	TOTAL		OR	TOTAL	
		(Column 1)		/Colu	mn 2)	(Column 3)	A	DDIT. FEE		JO., \	ADDIT. FEE	·
Γ.		CLAIMS		HIGH	IEST		Г		ADDI-	1	<del></del>	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		ОR	X\$18≃	
	Independent	* NTATION OF M	Minus	***	T CL AINA	]=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	INTATION OF W	ULTIPLE DE	PENDEN	CLANVI			+140≈	*	OR	+280=	
							-A	TOTAL DDIT. FEE		ΩD	TOTAL ADDIT. FEE	
		(Column 1)	·	(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE	) -	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		- 	lt	X42=			X84=	· .
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	776-		OR.	107-	
* If About the second s								+140=	man mayor and	OR	+280=	4 4
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
**		ımber Previously F nber Previously Pa							propriate bo	x in co	lumn 1.	